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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875								Application or Docket Number 10/797,401			ing Date 09/2004	☐ To be Mailed	
	Al	D – PART	OTHER THAN SMALL ENTITY OR SMALL ENTITY										
FOR NUMBER FILE				.ED	NUMBER EXTRA		П	RATE (\$)	FEE (\$)		RATE (\$)	FEE (\$)	
	BASIC FEE (37 CFR 1.16(a), (b),	or (c))	N/A	N/A		N/A		N/A			N/A		
	SEARCH FEE (37 CFR 1 16(k), (i),	or (m))	N/A		N/A			N/A			N/A		
	EXAMINATION FE (37 CFR 1.16(a), (p),		N/A		N/A			N/A			N/A		
	TAL CLAIMS CFR 1.16(i))		minus 20 = *					x s =		OR	x s =		
IND (37	EPENDENT CLAIM CFR 1.16(h))	IS	m	minus 3 = *				X \$ =			X \$ =		
	APPLICATION SIZE (37 CFR 1.16(s))	FEE shee is \$2 addi	If the specification and drawings sheets of paper, the application is \$250 (\$125 for small entity) for additional 50 sheets or fraction 35 U.S.C. 41(a)(1)(G) and 37 C			size fee due r each nereof. See							
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))							П						
* If the difference in column 1 is less than zero, enter "0" in column 2.								TOTAL		l '	TOTAL		
APPLICATION AS AMENDED – PART II OTHER THAN (Column 1) (Column 2) (Column 3) SMALL ENTITY OR SMALL ENTITY GLAMS HIGHEST													
AMENDMENT	02/07/2011	REMAINING AFTER AMENDMENT		NUMBER PREVIOUSLY PAID FOR		PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
	Total (37 CFR 1-16())	* 32	Minus	42		= 0	П	X \$26 =	0	OR	X S =		
	Independent (37 CFR 1.16(h))	• 11	Minus	9		2	П	X \$110 =	220	OR	X S =		
	Application Size Fee (37 CFR 1.16(s))												
^	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))									OR			
								TOTAL ADD'L FEE	220	OR	TOTAL ADD'L FEE		
(Column 1) (Column 2) (Column 3)													
AMENDMENT		CLAIMS REMAINING AFTER AMENDMENT		HIGHES NUMBEI PREVIOUS PAID FO	R SLY	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
	Total (37 CFR 1 160))		Minus				П	X \$ =		OR	X 8 =		
ĕ	Independent (37 CFR 1 16(h))		Minus	***	ŀ		Ш	X \$ =		OR	x s =		
Σ	Application Size Fee (37 CFR 1.16(s))												
AM	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))									OR			
If the order is column 1 is lose than the order is column 2 write 10° is column 2								TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE		
** 11	"If the entry in column 1 is less than the entry in column 2, write "0" in column 3. Legal Instrument Examiner: "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3". The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												

This collection of Information is required by 37 CFR 1.16. The information is required to obtain or retain a barref flat yfte public which is to file (and by the USPTO) to process) an application. Confidentially is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of the time you require to complete his long and or suggestion for neducing the thindship, should be sent to the Cited information Officer. U.S. Patient and Trademark Office, U.S. Department of Commence, P.O. Box 1450, Alexandrius, W. 22313-1450, D.O. NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.